

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TL	ON	3/12/01 05/18/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

Rejected	N .....	Non-elected
Allowed	I .....	Interference
Canceled	A .....	Appeal
Restricted	O .....	Objected

(Through numeral)...

Claim	Date
Final	R
Original	12/15
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here